

## 24 th Iranian Congress of Radiology

The aim of this lecture is to introduce the use of transcutaneous US for screening and diagnosis of GER in adults.

It is believed that according to many researches, this modality (US) is noninvasive/ safe and acceptable for any patient who complains of symptoms suggestive of GER. These studies concluded that inclusion of ultrasonography in the initial workup of patients with symptoms of GER may reduce the need for more invasive diagnostic procedures.

### Methods:

Ultrasonography for evaluation of GER can be performed at cervical region of esophagus or at the region of GE Junction and distal esophagus. Details of these techniques will be present in the article.

### Discussion:

As the transcutaneous esophagus ultrasonography is a non-invasive and highly sensitive technique for diagnosing GER but unfortunately it has not been routinely used in adults for diagnosis of GER in our country/ so we hope that by performing further studies in this field we can apply this non-invasive method as a diagnostic tool for GERD in adult in the near future.

Code: 8751

Poster Presentation

### Radiological Criteria for Differentiation of Esophageal Cancers

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### Objectives:

Esophageal cancer is one of the most lethal of all neoplasms. Barium studies have been accepted as the most radiological technique for diagnosing esophageal cancer. We aimed to evaluate the radiological aspects of patients with esophageal cancers seen at our center.

### Methods:

We evaluated 80 patients with cancer of esophagus presenting at Imam Khomeini hospital, Tabriz, Iran, between January 2005 and September 2007. The evaluation included radiological aspects, pathological and demographic characteristics of patients with esophagus cancer. Location, size, histologic type and cardiac involvement of tumors were assessed. Data were analyzed by SPSS software.

### Results:

There were 50 males and 30 females, with a median age of 58.4 years (range 30-90). Among 80 patients with esophageal cancer, 72/80 (90%) were diagnosed as SCC and the remaining 8/80 (10%) as adenocarcinoma. 41/80 (51.3%) were located in the lower third esophagus. The most common location of tumors was middle third of esophagus in females and lower third of esophagus in males. Involvement of cardia was observed in 8/8 (100%) of adenocarcinoma. 36.1% of lesions were infiltrative in SCC vs. 12.5% in adenocarcinoma. Cardia involvement, Vegetation and stagnation were most frequent in adenocarcinoma.



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### Conclusions:

This approach suggests that cardiac involvement combine with vegetation and stagnation can be useful tool in diagnosis of adenocarcinoma in the lower third esophagus.

Code: 8760

Poster Presentation

### Normal US and CT Anatomy and Disease Processes of the Pancreatoduodenal Region

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The pancreatoduodenal region contains the pancreas, duodenum, and common bile duct. Diseases arising from or involving this region can be categorized into four types: diseases associated with the pancreas, duodenum, lymph nodes, and distal common bile duct. We present the normal anatomy, US and CT findings of these diseases, along with features that can be used to distinguish among them, in this pictorial essay. Knowledge of the normal anatomy and imaging findings of each disease may allow one to make a specific diagnosis, which assists in clinical management and helps to prevent unnecessary surgical interventions. This article is based on the experience of the authors on US and CT scan. In this study we correlated US and CT features of the disease processes with surgical findings. The disease processes involving this region included ampullary and periampullary carcinomas, intrapancreatic distal CBD carcinomas, pancreatic head or uncinate process carcinomas, periampullary duodenal carcinomas, and unclassified periampullary carcinomas.



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